



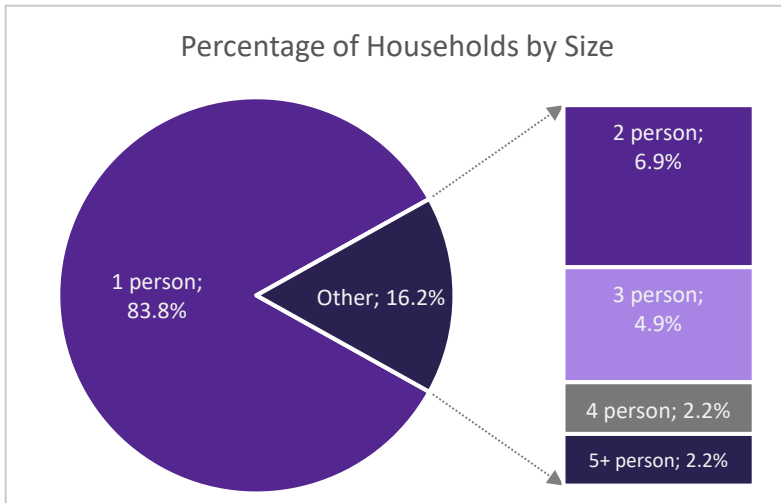
Quarterly Report

NY-523 - Glen Falls/Saratoga Springs/Saratoga County CoC

1/1/2018-3/31/2018

Overview – All Programs

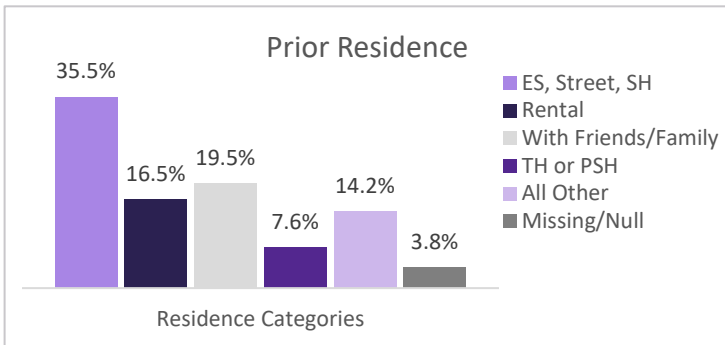
Between 1/1/2018 and 3/31/2018, providers in the Glen Falls/Saratoga Springs/Saratoga County CoC served 656 people experiencing or at risk of experiencing homelessnessⁱ. Residential programs served 418 peopleⁱⁱ, and supportive services only (SSO) programs served 238 peopleⁱⁱⁱ.



There were 493 households in the CoC, including: 376 households without children (containing 395 individuals), 66 households with both adults and children (containing 86 adults and 128 children), and 51 households of only unaccompanied minors (under 18 years of age), containing 51 minors^{iv}.

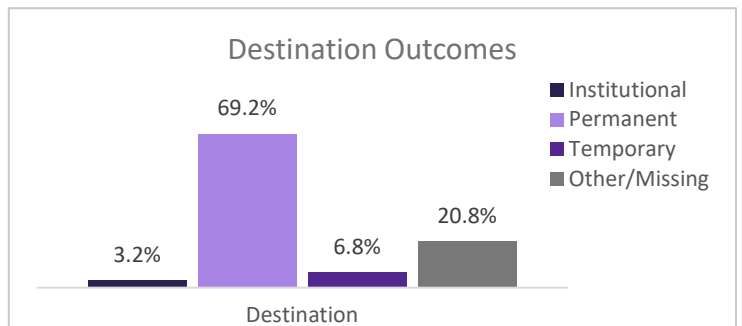
By gender, providers in the CoC served 294 (44.8%) women, 354 (54.0%) men, and 6 (0.9%) trans-identified individuals.

The racial and ethnic breakdown of those served included: 519 (79.1%) White, 87 (13.3%) Black or African-American, 5 (0.8%) Asian, 1 (0.2%) Native Hawaiian or Other Pacific Islander, 4 (0.6%) American Indian or Alaskan Native, and 27 (4.1%) Multiple Races. 34 (5.2%) individuals identified as Hispanic/Latino regardless of race.



Of 527 adults or heads of household, 187 (35.5%) indicated a prior residence of Emergency Shelter, the streets, or Safe Haven. Of these clients, 85 (45.5%) reported no previous episodes of homelessness within the last three years. 47 (25.1%), 17 (9.1%), and 33 (17.6%) reported that they had been 2, 3, or 4+ times homeless (respectively) during the same time frame. 12 (6.4%) did not report on this data element.

For the adults or heads of household who were in program a year or more and received an annual assessment (65), 24 (36.9%) saw an increase in income (cash and cash benefits) between admission and the most recent update, while 14 (21.5%) saw no change in income that was initially higher than zero^v.

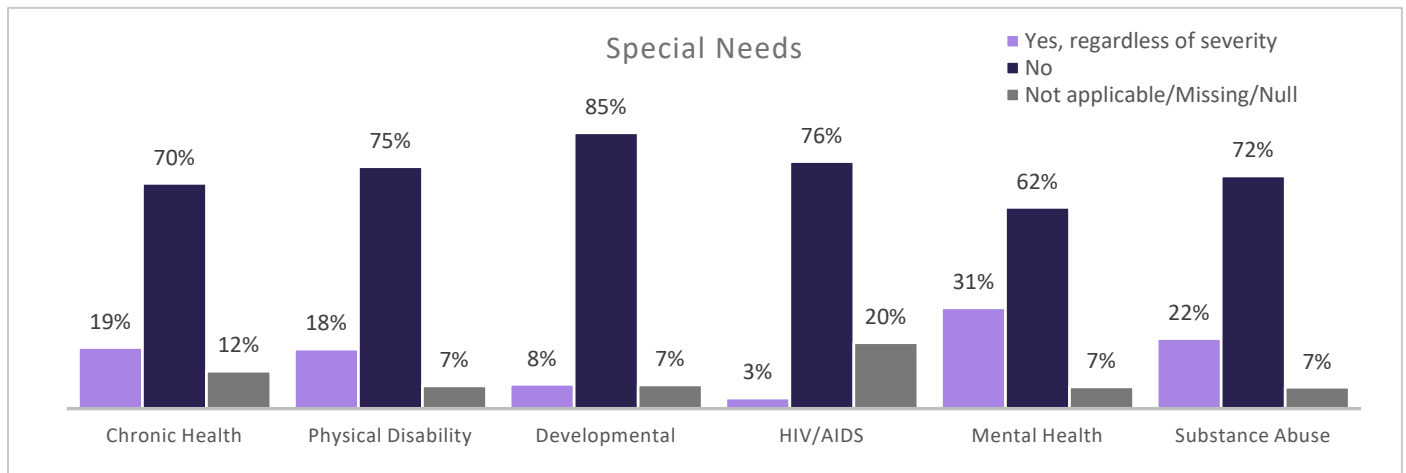


The total number of individuals discharged during the quarter was 221, which included 150 adults and 71 children. 153 (69.2%) were discharged to a permanent destination. Income for 6 (4.0%) clients over 18 rose between admission and discharge, while 60 (40.0%) maintained stable income of greater than zero.

Sub-Populations – All Programs

16 (3.4%) individuals over 18 met the criteria for chronic homelessness at the time of project entry.^{vi} 1 out of every 4.1 adults receiving services this quarter was a veteran (24.3%). Out of the 116 veterans served, 49 (42.2%) reported a disabling condition and 3 (2.6%) met the criteria for chronic homelessness at admission. Of all clients, 108 (22.6%) were considered youth (aged 18- 24 years).

Special Needs – HUD and HHS Funded Programs Only



60.9% of adults (148/243) and 24.3% of children (33/136) in HUD or HHS funded programs self-reported at least one physical, emotional, or other health condition *regardless of whether the condition had become serious enough to be disabling*. Among those reporting multiple conditions, the most significant comorbidity was Mental Health and Substance Use (41). When taking severity of condition into account, 83 adults reported conditions that met the criteria to be considered a disability.

Data quality and completeness play a major role in ensuring that these data accurately reflect the work being done within the CoC. CARES routinely tracks the health of HMIS data and this information may be found at www.caresny.org.

ⁱ Data breakdowns for subsequent categories may total less than this number due to differences in data reporting across funders, as well as data completeness. Information on **reporting methodology** and on **data completeness** may be found at www.caresny.org.

ⁱⁱ For the purposes of this report, any RRH enrollments are considered residential.

ⁱⁱⁱ Counts are unduplicated within the category itself only; IF SERVED BY BOTH, a client is counted once in Residential **AND** once in Supportive Services Only.

^{iv} Data based on current age and household composition, which may differ from information reported at admission

^v This measure includes individuals across all project types

^{vi} Please note that HMIS began using HUD's new definition of chronic homelessness effective 10/1/2015 and all individuals in program on or after that date are measured using this new definition, even if their program start date was prior to the change in definition taking effect.

Projects Included in Report

NY-523 - Glen Falls/Saratoga Springs/Saratoga County CoC

Emergency Shelter

CAPTAIN -- Malta Youth Center
CAPTAIN STEHP-Wait House STEHP Emergency Shelter
SOS Emergency Shelter
VCHC Guardian House Emergency Beds
VCHC Vets Emergency Bed Program

Homelessness Prevention

Captain STEHP Program Prevention
CAPTAIN STEHP-Wait House Prevention
Legal Aid Rural STEHP Prevention
VCHC SSVF Prevention

PH - Permanent Supportive Housing

Albany VASH - Albany VISN
AVH Perm Housing
OOCSSWC Community - Chronic
OOCSSWC Community - Families
OOCSSWC Community - Regular
OOCSSWC Community 2011
OOCSSWC Housing First - Chronic
OOCSSWC Housing First - Regular
OOCSSWC Shelter Plus Care 2010
Support Ministries - Ahana House
TSA - City of Saratoga Springs Rental Assistance Program
TSA MICA Supportive Housing
VCHC Center Street
VCHC Northern Pines
VCHC Saratoga Veterans Apartment Program
WWAMH Housing First Program

PH - Rapid Re-Housing

CAPTAIN STEHP-Wait House Rapid Rehousing
Captain STEPH Program Rapid Rehousing
VCHC SSVF Program Rapid Rehousing

Street Outreach

CAPTAIN RHY Outreach

Transitional Housing

AVH Vets House
VCHC Guardian House
VCHC Vets House Program
Wait House TLP